

**Application Instructions for Obtaining a Kentucky State ABC License**

**REQUIREMENTS:**

- a. You must be at least 21 to apply.
  - b. You must be a Ky. resident for the past year unless you apply as a corporation, LLC or Ltd. partnership.
  - c. You must be a citizen of the US unless you apply as a corporation, LLC or Ltd. partnership ownership.
  - d. Corporations, LLC's and Ltd's with officers & directors who do not live in Ky. need to provide a state-wide police record check for the past 5 years for each individual named in the application from the state(s) where they have lived. If needed, you may call our office for these instructions (502) 564-4850 Division of Enforcement.
  - e. Individuals, partners, officers, directors or managers may not apply if, within the past 5 years, they have been convicted of any felony; or within the past 2 years have been convicted of any alcohol or controlled substance misdemeanor.
- KRS 243.100 Persons who may not be licensed.  
KRS 243.220 Premises that may not be licensed.  
KRS 243.390 Sworn information to be contained in application.  
KRS 243.450 Causes for refusal of a license.

- STEP 1.** You must advertise your intention to apply for an ABC license(s) one time in a newspaper of general circulation in the area where the premises to be licensed is located. An officer of the newspaper must complete the affidavit of publication, which is enclosed. The completed affidavit and clipping must be attached to your application.
- STEP 2.** Answer all questions and have the form notarized. Incomplete or deficient applications delay processing and your application may be returned. All applications must contain your 9 digit zip code for the address where you will operate your alcohol business. If you do not know this 9 digit zip code, you may call the following numbers to secure this information:
- 513-684-5574 for the following Kentucky counties: Boone, Bracken, Carroll, Campbell, Fleming, Gallatin, Grant, Harrison, Kenton, Mason, Pendleton and Robertson. All other counties in Kentucky may call 502-454-1855. (You can also find this information on the Internet at [http://www.usps.gov/ncsc/lookups/lookup\\_zip+4.html](http://www.usps.gov/ncsc/lookups/lookup_zip+4.html))
- STEP 3.** If you apply as a corporation, limited partnership, or limited liability company, attach a copy of your articles of incorporation, partnership papers, or organizational papers from the Secretary of State. Your company must be approved to do business in the state of Kentucky and in good standing with the Kentucky Secretary of State's Office. (You may obtain a copy of these documents from the following web address: <http://www.sos.state.ky.us/corporate/entityname.asp>)
- STEP 4.** If you do not own the real estate where you will sell alcohol, attach a signed copy of your lease, which does not expire before June 30<sup>th</sup>.
- STEP 5.** Attach a certified check, cashier check, or money order for your application fee(s). The fees are listed on the back page of the Schedule(s) you are submitting. Make payable to: Kentucky State Treasurer.
- STEP 6.** Attach any other required affidavits such as: fire marshal certificate of seating capacity for restaurants; surety bonds for manufacturers and wholesalers, etc. Your Schedule(s) will list any attachments you need to make.
- STEP 7.** Take your application(s) to your local ABC administrator and obtain their signature of approval on your state application(s) or make arrangements for the administrator to send written approval to the Frankfort ABC Office. You may call our office and obtain the name of the local ABC administrator in your area.
- STEP 8.** Your application(s), check, and attachments are now ready to be forwarded to our State ABC Office for processing. New licenses take approximately 30 - 60 days to process and are not issued until a field inspection has been completed by our Enforcement Division. If your license is not issued for any reason, you must submit a written request for a refund. The Department will retain \$50.00 of your application fee for processing costs.

**For assistance please contact:**

**FRANKFORT OFFICE:**

Dept. of Alcoholic Beverage Control  
1003 Twilight Trail  
Frankfort, Kentucky 40601-8400  
502-564-4850 phone  
502-564-1442 fax

**LOUISVILLE OFFICE:**

Dept of Alcoholic Beverage Control  
Chestnut Centre Building, Suite 526  
410 W. Chestnut Street  
Louisville, Kentucky 40202-2324  
502-595-4004 phone  
502-595-4649 fax

**NOTE:** You are required to obtain a Federal Special "Occupational Tax" License from the BATF for \$250.00 per year. You must contact one of the following offices to obtain an application form and information about your federal permit.

Bureau of Alcohol, Tobacco & Firearms

(502) 223-3350 Frankfort, Kentucky Office  
(502) 582-5216 Louisville, Kentucky Office

## **TYPE OF LIQUOR AND WINE LICENSES AVAILABLE BY AREAS**

### **Areas qualified to hold any type of liquor and or wine by the drink license**

**1<sup>st</sup>. Class Cities and their Counties**

Jefferson County All

**2<sup>nd</sup>. Class Cities and their Counties**

City of Ashland  
City of Bowling Green  
City of Richmond  
Campbell County  
Christian County  
Daviess County  
Fayette County  
Franklin County  
Kenton County  
McCracken County

**3<sup>rd</sup>. Class Cities and their Counties**

City of Nicholasville  
City of Pikeville  
Boone County  
Bourbon County  
Clark County  
Henderson County  
Mason County  
Perry County

**4<sup>th</sup>. Class Cities**

City of Augusta  
City of Bardstown  
City of Carrollton  
City of Morehead  
City of Shepherdsville

### **Golf Courses in Limited Election Areas Liquor/Wine/Beer by the Drink**

Persimmon Ridge Golf Course	Shelby Co.
Champions Golf Course	Nicholasville

### **Limited Election Areas for Liquor/Wine/Beer by the Drink Only For 70% Food Restaurant**

City of Georgetown  
City of Guthrie  
City of Kuttawa  
City of Murray  
City of Radcliff  
Shelby County

### **Areas that have limited liquor by the drink license qualify for 50% Food Sales Restaurant Liquor Drink Licenses (RD) or Motel Liquor Drink (ML) or Restaurant Wine Drink (RWL)**

**1<sup>st</sup>., 2<sup>nd</sup>. 3<sup>rd</sup>., Class Cities and their Counties**

All Wet Areas

**4<sup>th</sup>. Class Cities and their Counties**

City of Carlisle  
City of Cynthiana (Private Club Liquor/Beer Only) (PC)  
City of Fulton  
City of Madisonville (and Private Club Liquor/Beer Only) (PC)  
City of Mt. Sterling (and Private Club Liquor/Beer Only) (PC)  
City of Prestonsburg  
City of Salyersville  
City of Shelbyville  
Carroll County  
Harrison County (Private Club Liquor/Beer Only) (PC)  
Marion County  
Nelson County  
Union County

### **Areas that qualify for Sunday Liquor Drink**

- SD Campbell & Kenton Counties for Liquor Drink Licensees.
- LS Qualifying 50% food restaurants in Fayette and Jefferson Counties and Cities of Bowling Green, Maysville and Shelbyville.
- RS Jefferson County for LD and PC Licensees.
- ESL All wet areas for Convention Centers, Automobiles, Race Tracks, Horse Race Tracks, and Commercial Airport Licensees.

**Areas qualified to hold  
Retail Package Liquor Licenses (LP),  
Sampling Licenses for Package Liquor Retailers (RSP)  
and Restaurant Wine Drink Licenses (RWL)  
1<sup>st</sup>., 2<sup>nd</sup>. 3<sup>rd</sup>., and 4<sup>th</sup>. Class Cities and their Counties**

All Wet Areas

**5<sup>th</sup>. Class Cities and their Counties**

Gallatin County  
Meade County  
Wolf County

**All other types of licenses may be issued in**

All Wet Areas

**Manufacturing, Industrial & Storage Licenses  
may be issued in**

All wet or dry areas

**"BASIC APPLICATION" FOR ALCOHOLIC BEVERAGE LICENSES"**

*Applications may be returned if all questions are not answered completely.*

**LEAVE BLANK - FOR ABC USE ONLY**

License # \_\_\_\_\_ \$ \_\_\_\_\_ Val. \_\_\_\_\_ License # \_\_\_\_\_ \$ \_\_\_\_\_ Val. \_\_\_\_\_

License # \_\_\_\_\_ \$ \_\_\_\_\_ Val. \_\_\_\_\_ License # \_\_\_\_\_ \$ \_\_\_\_\_ Val. \_\_\_\_\_

Malt Beverage Administrator's Approval \_\_\_\_\_ Date \_\_\_\_\_

Distilled Spirits Administrator's Approval \_\_\_\_\_ Date \_\_\_\_\_

**(A)**

Applicant's name (s) or company to be licensed \_\_\_\_\_

D.B.A. (Name of Business) \_\_\_\_\_

Address of premises to be licensed \_\_\_\_\_

City and State \_\_\_\_\_

Include Your 9-Digit Zip Code \_\_\_\_\_ County \_\_\_\_\_

Mailing address if different from above \_\_\_\_\_

Bus. Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

Premises Phone # \_\_\_\_\_

List all schedules you have attached \_\_\_\_\_ Enter amount of license fee you have enclosed \_\_\_\_\_

**(B)**

1. Provide the tax numbers (to be obtained from Ky. Revenue Cabinet, 502-564-3306). Tax numbers must be issued in the applicant's name. Failure to provide the numbers or discrepancies in the name will prevent this application from being processed.

Ky. Sales & Use Tax # \_\_\_\_\_

Ky. Withholding Tax # \_\_\_\_\_

Ky. Corporate Tax # \_\_\_\_\_

Federal EIN # \_\_\_\_\_

**(C)**

2. List all types of licenses you are applying for \_\_\_\_\_

3. Period to be covered by the license(s) from (month) \_\_\_\_\_, (day) \_\_\_\_\_, (year) \_\_\_\_\_, through June 30th (year) \_\_\_\_\_

4. Are you the owner of the real estate where the premises are to be licensed? ☐ Yes ☐ No

If not, attach a copy of your lease. Your lease must extend through June 30th. Give date lease expires \_\_\_\_\_

Give the name of the owner of the real estate \_\_\_\_\_

**(D)**

5. Complete the following for the business proprietor, partner(s) and all persons interested in the business to be licensed. List all owners, officers, directors, partners, managing members, members, and shareholders (unless publicly held). Show 100% of the ownership.

*If additional space is needed, please make an attachment.*

NAME AND ADDRESS	ALL PHONE NUMBERS	SOCIAL SECURITY NUMBER	TITLE	USA CITIZEN	DATE OF BIRTH	DATE OF KENTUCKY RESIDENCY	% OF OWNER SHIP
	H W O			<input type="checkbox"/> Yes <input type="checkbox"/> No			%
	H W O			<input type="checkbox"/> Yes <input type="checkbox"/> No			%
	H W O			<input type="checkbox"/> Yes <input type="checkbox"/> No			%
	H W O			<input type="checkbox"/> Yes <input type="checkbox"/> No			%
	H W O			<input type="checkbox"/> Yes <input type="checkbox"/> No			%

H = HOME; W = WORK; O = OTHER



- (E) 6. Is the applicant a corporation, limited partnership, or limited liability company, in good standing with the Kentucky Secretary of State? ☐ Yes ☐ No  
List the State incorporated or organized in \_\_\_\_\_  
Attach a copy of your Articles of Incorporation, which shows the filing date with the Kentucky Secretary of State's Office.
7. Is the entire license fee paid by the applicant and by no other person? ☐ Yes ☐ No
8. Are the premises to be licensed located within an incorporated city or town? ☐ Yes ☐ No  
If yes, list the name of the city or town \_\_\_\_\_
9. Have you ever been licensed to sell alcoholic beverages? ☐ Yes ☐ No  
If yes, give the state and license number(s) \_\_\_\_\_  
If, Kentucky, are you transferring this license to a new location? ☐ Yes ☐ No
10. Does anyone named in D5 have an interest in any kind of alcoholic beverage business or the premises of any alcoholic beverage business other than that for which you are herein applying? ☐ Yes ☐ No  
If yes, describe the interest(s) \_\_\_\_\_
11. a. Has the applicant or any person named in D5 been convicted of any felony? ☐ Yes ☐ No  
b. Has the applicant or any person named in D5 been convicted of a misdemeanor directly or indirectly related to alcohol or a controlled substance? ☐ Yes ☐ No  
If yes to either question, attach a statement giving a full explanation, including date(s) of conviction(s).
12. Has a license been suspended or revoked or denied for the premises or any person named herein? ☐ Yes ☐ No  
If yes, attach a statement giving a full explanation, including dates of suspension, revocation, or denial.
13. Are the premises to be licensed and the entrance located on the street level? ☐ Yes ☐ No  
If no, is the business a hotel, club or resturant? ☐ Yes ☐ No
14. a. Have the premises been licensed to sell alcoholic beverages in the past twelve months? ☐ Yes ☐ No  
b. Are the premises currently licensed? ☐ Yes ☐ No  
c. If yes, give the Kentucky license number(s) \_\_\_\_\_  
d. Is the license being transferred to you? ☐ Yes ☐ No
15. Are you acquiring an interest in an existing business? ☐ Yes ☐ No  
If yes, check all the following boxes that apply to you. ☐ inventory ☐ fixtures & equipment  
☐ ownership by purchase of shares ☐ ownership by purchase of assets ☐ leases ☐ other \_\_\_\_\_

THE SELLER SHOULD COMPLETE THIS SECTION IF ITEM ~~14~~<sup>15</sup> HAS BEEN ANSWERED "YES"  
OR IF SOMEONE IS TRANSFERRING THEIR LICENSE(S) TO YOU.

(F) I (we), \_\_\_\_\_ the seller(s) or owner(s) of the business known as  
(Enter the exact name(s) that appears on the current license(s))  
located at \_\_\_\_\_  
Kentucky, am the holder of a ☐ malt beverage ☐ liquor by drink ☐ liquor by package ☐ \_\_\_\_\_ (other)  
license(s). The license number(s) is (are) \_\_\_\_\_. I hereby represent that I have agreed to  
convey all license privileges (permitted by law) to \_\_\_\_\_  
(Enter the exact name(s) that is applying to become the new licensee.)  
I (we) understand that I (we) may not relinquish control of the business, premises, or my interest in the licenses until such time as  
the buyer's application has been approved by the Department of Alcoholic Beverage Control.  
Signature of seller \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_  
(If a partnership, all partners must sign. If a corporation, one officer must sign.)  
Sworn or affirmed before me on this \_\_\_\_\_ day of \_\_\_\_\_, year of \_\_\_\_\_. My commission expires \_\_\_\_\_  
Notary Public \_\_\_\_\_ County of \_\_\_\_\_ Commonwealth of Kentucky

(G) AFFIDAVIT OF BUYER OR NEW PERSON APPLYING FOR ABC LICENSE(S)  
I, \_\_\_\_\_ ( ☐ buyer or ☐ new applicant), do hereby swear or affirm that all statements contained  
in this application and all its attachments are true and correct to the best of my knowledge, information and belief. I further agree  
that I shall not engage in any activity involving alcoholic beverages at the premises described herein until I have been issued the  
appropriate license(s) by the Department of Alcoholic Beverage Control. Once the license(s) is issued, I hereby swear or affirm that I  
will abide by all state and local statutes, regulations, and ordinances relating to the manufacture, sale, use, and trafficking in alcoholic  
beverages.  
Signature of buyer or new applicant \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_  
Sworn or affirmed before me on this \_\_\_\_\_ day of \_\_\_\_\_, year of \_\_\_\_\_. My commission expires \_\_\_\_\_  
Notary Public \_\_\_\_\_ County of \_\_\_\_\_ Commonwealth of Kentucky